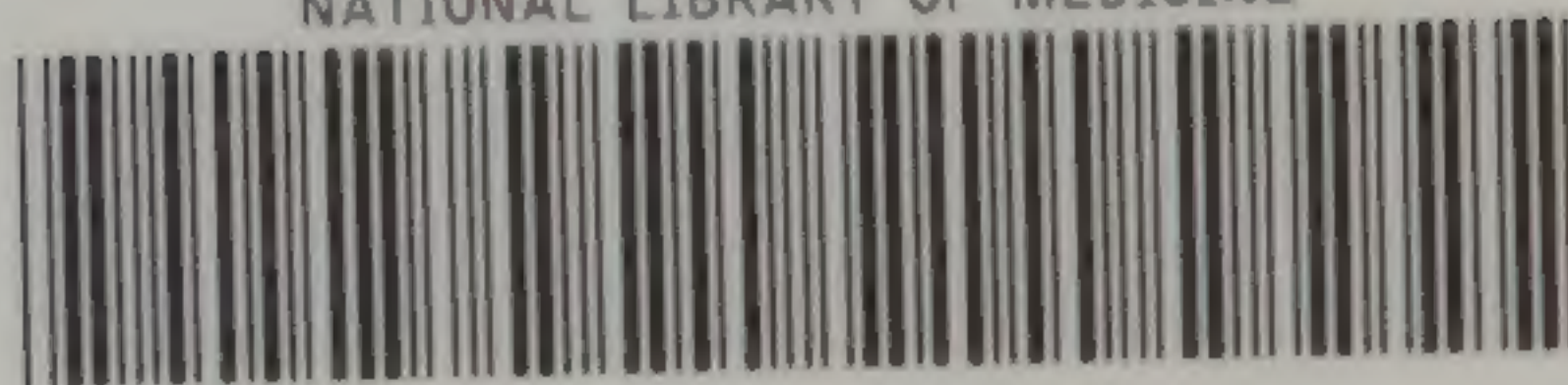


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AND
ITS DISEASES.

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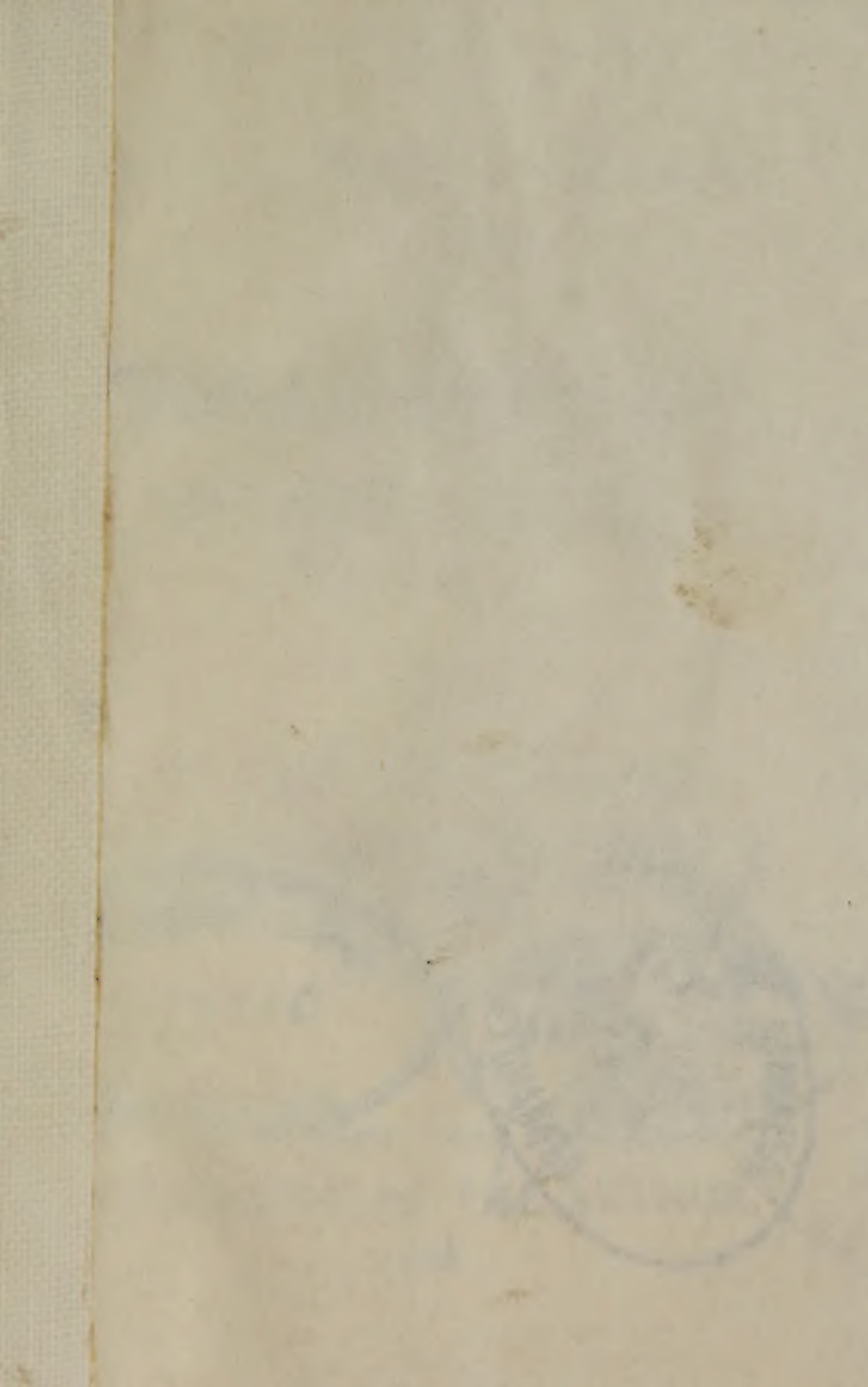
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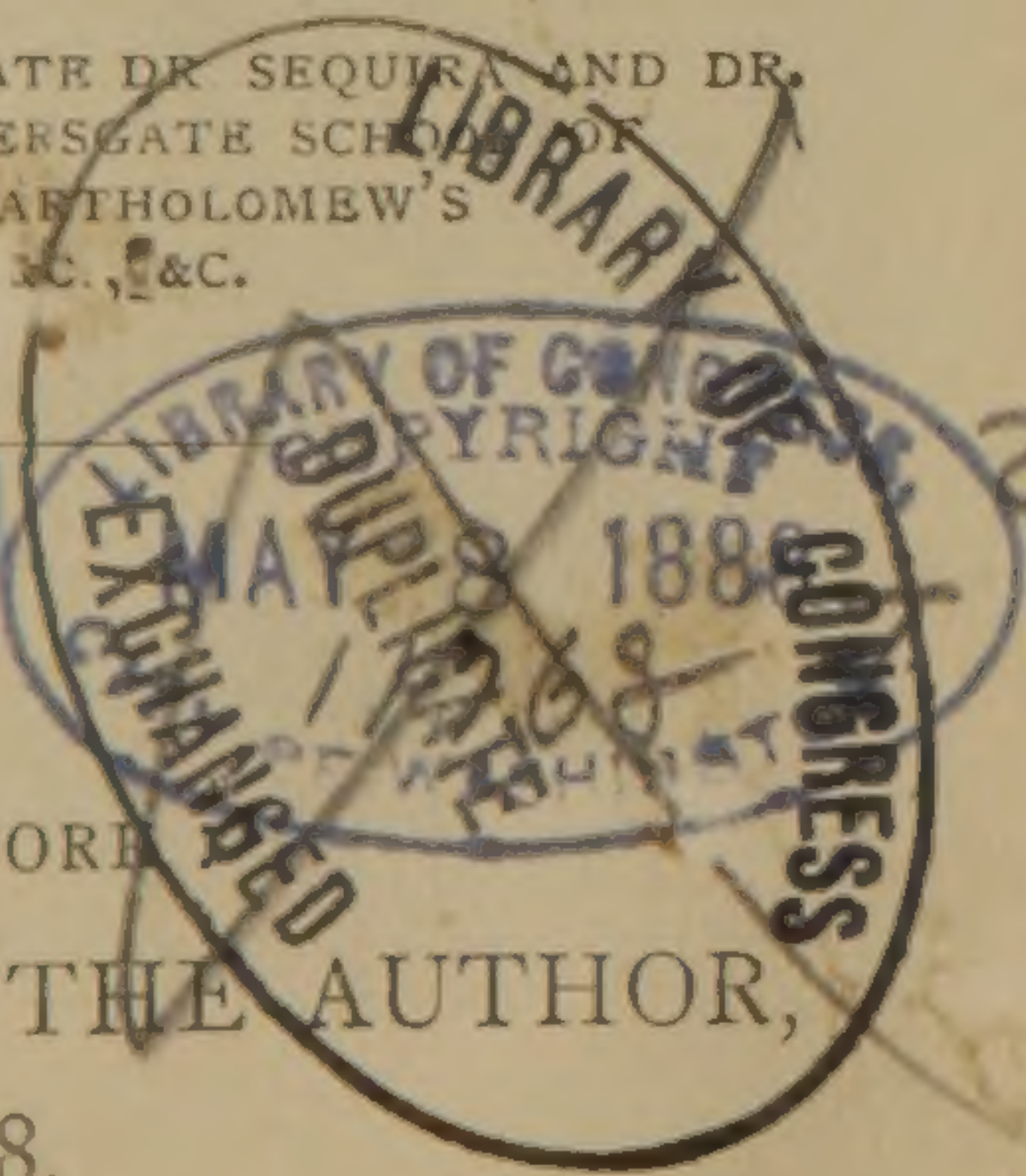
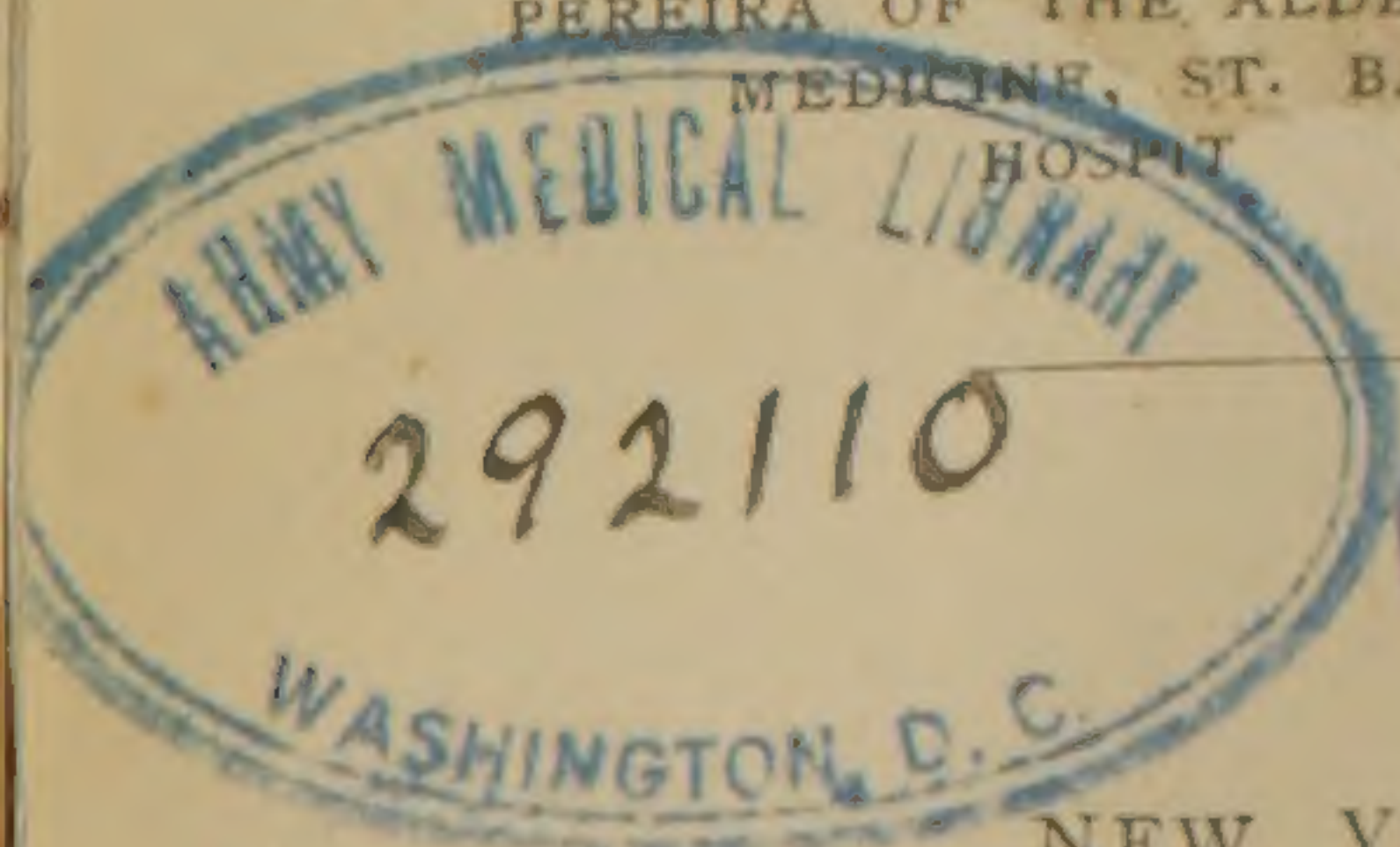
The Skin and its Complicated Diseases,

BLOOD POISONING AND IMPURITIES.

—BY—

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DR. H. J. JORDAN.

PREFACE.

The true aim of an author should be to instruct, to improve. This I have endeavored to do in the following pages, and is addressed principally to my non-professional readers who may be suffering from any cutaneous disease or blood impurity. I have as far as possible used terms that will be understood by all. Most works on this subject are hampered with such a variety of dermatological technicalities that can only be equaled by the classification of plants by the

great Linnaus. In a small pocket volume like this, it is impossible and unnecessary to particularize every affection the skin is liable to, but I have endeavored to say a few words on the most prominent cases that daily come under the physician's notice. Should this little work prove as useful as it is intended, the object of the Author will be attained.

333 WEST 23D STREET, NEW YORK.

CONTENTS.

Eczema	10
Scabies	14
Erysipelas	18
Scrofula	21
Lupus	24
Syphilis	30
Warts and Vegetation	47
Tertiary Symptoms	48
Nervous Affections of the Skin	57
Foods and Drugs	61
Affections of the Hair System	67
Malaria	79
Bathing on the Health of the Skin	94
Influence of Diet on the Skin	101

SKIN DISEASES

AND ALL

BLOOD IMPURITIES

The skin in its relations to the general system no less than in the individual structural derangement and morbid phenomena must be regarded as an organ capable of exerting a considerable influence over the well-being of the animal economy and with which its closest and most intimate investigation and study is physiological and pathological. Its physiological functions are mainly related to its sensibility and secretory

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The skin in its relations to the general system no less than in the individual, structural derangements and morbid phenomena must be regarded as an organ capable of exerting a considerable influence over the well-being of the animal economy and worthy of our closest and most earnest investigation and study. Its physiological relations are manifested in its sensibility and secreting

capacity, its pathological relations in its sympathies and nutritive properties, while its morbid state are replete with significations and interest. No one expects the anatomy, physiology, and pathology of the skin in a small volume like this, neither is it necessary, but I shall here enumerate those affections that are most common, and that are brought daily under my notice.

1. Eczema, which means eruptions and nothing more, (if we apply our numerical examinations to these affections as a family instead of to eczema alone, we arrive at the important conclusion that nearly six hundred in a thousand, or considerably more than half of the whole of

the cutaneous diseases of the body are eczematous,) and we thereby add double force to our arrangements as to the importance of Eczema, the advantage of regarding it as a disease, of placing it in the front of all other cutaneous affections.

2. Scabies characterized by scalliness, redness, and in some cases by pustules, excoriations, accidental abrasions, and is accompanied by excessive itching being augmented by warmth.

3. Erysipelas.

4. Scrofula.

5. Lupus, so named from its eating or destroying quality.

6. Syphilitic Affections.

7. Affections of the hair system.

ECZEMA.

Eczema, a non-contagious inflammation of the skin, which is remarkable for presenting great variety in its general features, development and mode of progress, its characteristic appearance is that of a moist surface, and more or less covered with crusts. At a later stage it takes the form of red and dry patches covered with thin scales. The disease is always attended with itching, and its tendency is to run a protracted course. Although non-contagious in the ordinary acceptation of the term, yet an eczematous inflammation is readily produced on or about a scratch or abraded surface by contact with:

purulent eczematous discharges.—Eczema of the scalp is frequently associated with Eczema of the face, if it occupies the region of beard the inflammatory action frequently extends to the hair, this generally becomes chronic, and constitutes the Barber's Itch. When this disease attacks the genitals it involves the penis and scrotum; it not unfrequently attacks the deep furrows of the folds of the prepuce, and assumes a chronic character; it is dry, squamous and fissured, the skin being indurated and thickened, and apt to contract around the glans and occasion phymosis, it is also met with similarly situated upon the mucous covering of the clitoris.

Having enumerated all we think necessary on this most inexhaustible subject, we will now look to the treatment, which resolves itself into one of debility, a treatment or constitutional debility and a treatment of local debility, and the influence which we are called upon to exercise over our patients is one which shall have for its object to restore power, and thereby to regulate function, and to confirm health, for health is nothing more than correct function united with normal power. In general terms our constitutional treatment must be directed to the regulation of the functions, and concurrently with regulation of functions to the restoration of the tone, the vigor, the vitality of the general system.

The commonest of the remote predisposing causes of Eczema we have seen to be derangement of digestion and errors of diet, and more particularly to constitutional local or acquired debility. The complications may occur in patients who are syphilitic or scrofulous, the treatment involves the general condition of the patient and must be both general and local under the supervision of a competent medical authority, this must be apparent from the fact that the remedies employed, besides being dangerous, include hygiene, diet, carthatics, diuretics, nepatics, alkalies, tonics, &c., according to the indications furnished by each individual case.

SCABIES.

This is an affection of the skin characterized by scaliness, redness, and in some cases by pustules, to which may be added excoriations, accidental abrasions and scratches produced by the nails. It is accompanied with excessive itching, the itching being augmented by warmth, and especially by the heat of the bed. These appearances are due to the presence in the skin of a minute animalcule, which burrows within the skin and excites great irritation. The burrowing of this little insect gives rise to the scaliness. The vesicles, which are few and scattered, present some differences in form and char-

acter resulting from their position. Thus, in the thin epidermis of the lateral surfaces of the fingers they are conical and acuminate, on the wrists and other parts of the body they are frequently more or less rounded and resemble the vesicles of eczema, while in the latter situations they are also variable in size. The vesicles differ in reference to their contents, in those of a conical form the contained fluid is transparent and viscous, in the rounded vesicle the fluid is also transparent, but in some it is more or less opaque and puriform. The eruption of Scabies usually makes its first appearance between the fingers, from these it extends more or less quickly

to the wrists, the elbows, inner side of the thighs, lower part of the abdomen and the organs of generation; it may speedily spread over the entire body with the exception of the face, which is very rarely affected, indeed the only case on record with which I am acquainted of this disease affecting the face, is one mentioned by Alibert, which was supposed to have received it from the mamma of its nurse.

CAUSES.

Scabies affects all ages, both sexes, and all ranks of society, but is most frequently found among the lower classes, in whom personal cleanliness is neglected and the opportunity of transmission consequently

greater. When the disease makes its appearance in respectable families its source may generally be traced to laundresses and their connections. The treatment in these cases is generally local, but this must be determined upon by a competent physician.

ERYSIPELAS.

Erysipelas is a specific inflammation of the skin more frequent on the face than elsewhere, although affecting any part of the surface of the body, and is accompanied and often preceded by derangement of the digestive organs, and more or less severe fever. The inflammation has special disposition to spread, it is attended with much swelling, burning, and tingling heat, a sense of tension in the parts affected, and by a redness which disappears under pressure with the finger, to return as soon as the pressure is taken away. The disposition of Erysipelas to spread is shown by its habit of creaping on-

wards upon the neighboring skin and subsiding on the part first attacked, and leaving suddenly one spot to appear upon another at some distance.

The constitutional symptoms of Erysipelas are those of invasion course and decline, the symptoms of invasion are weariness and lassitude, depression of spirit, chills, with flushes of heat, pains in the back and limbs, giddiness, headache, thirst, loss of appetite, white-coated tongue, nausea, weight and oppression at the pit of the stomach, sometimes diarrhœa, sometimes constipation, hard pulse and dry skin. Simon observes that, in the early stage of Erysipelas, the urine puts on an in-

inflammatory character and is loaded with bile pigment, and is of a red color.

TREATMENT.

Erysipelas, being always very serious and often dangerous, demands the utmost care, and should only be treated by a skillful medical man.

SCROFULA.

Scrofula is especially remarkable for its chronic character, arising out of the low vitality of the morbid tissues. The tubercular swellings of cutaneous Scrofula are of small size, indolent, and of a purplish red color, they soften internally, break after a time, and give out a white curd-like matter, often remain open for a lengthened period, and when they disappear, frequently leave behind them a hard knot in the skin ; they are most commonly met with on the neck and face, and in the neighborhood of ulcers, or remains of ulcers resulting from inflammation of the lymphatic glands.

These swellings increase so slowly in size that they are often several months before they attain maturity, and if of any size are apt to open at various points, the result of softening of several parts of their structure, and when these openings do take place the tubercles continue in a fistulous state for many months longer.

In scrofulous subjects it is not uncommon to find an inflammation of the matrix of the nail. The disease begins by inflammation and swelling of the skin around the edges of the nail, the extremity of the finger swells considerably and becomes vividly red, and the scrofulous hypertrophy frequently extends to the

whole of the tissues of the part even to the bone, producing a clubbed finger. The nail after a time becomes separated and leaves an angry looking raw surface, upon which a rugged, ill-formed and imperfect nail is from time to time produced. The denuded derma covered with fungous granulations, secretes more or less of an unhealthy discharge, and the disease is kept up for a considerable length of time, often for many years. As we shall have something to say afterwards about Lupus, which is also a strumous or scrofulous degeneration of the tissues of the skin, attended with more or less hypertrophy with absorption and with ulcerations, we shall close this chapter and commence with

LUPUS,

which has three varieties :

Lupus exedens,

· Lupus non exedens,

Lupus erythematosus.

Lupus exedens is the most destructive of the three varieties, may attack any region of the body, but is most commonly met with in the face, particularly the nose ; on the latter it may begin in the mucous membrane or in the skin, but never mind its origin, the NOSE, CHEEKS, EYES, TEMPLES, FOREHEAD, and EARS may be first affected, it has also been met with on the scalp and on the penis, but it *generally appears first in the face*. When it invades

the skin it may begin at the tip of the nose or the side of the organ. In its origin it is a tubercle, which retains for a while its form and then ulcerates, sometimes quickly, more frequently slowly.

The presence of the tubercle, and especially of an ulcer, causes redness, swelling and hardness; the redness is dull and sometimes livid, and the pain, aching, gnawing or throbbing, but not very acute.

For a long time after its commencement the tubercle is covered with a brown crust, and there is a little discharge which remains undetached. In this smouldering state the disease may last many weeks, or months, at length the ulceration ex-

tends beyond the limits of the crust, and the nature of the disease becomes apparent. If the crust is removed, the ulcer will be found to be deep, secreting a dense white pus. At length the ulcer becomes inflamed, and its base congested and hard, and very soon the hard and congested tissues are destroyed by the ulceration. This is the course of the disease, the congestion and infiltration are repeated from time to time, each time followed by fresh ulcerations, and so by degrees, sometimes slow and sometimes fast, tissue after tissue is destroyed, until the entire nose is eaten away. I saw a case lately where the palate and roof of the mouth were completely destroyed.

Lupus non exedens is less destructive but more lasting, its situation is somewhat different, and is unattended with ulceration, generally beginning on the cheek or upper lip, or on the lobe of the ear, and spreading, not in depth like the former variety, but along the surface, this kind of Lupus is accompanied with little pain, and sometimes none, occasionally there is a sense of pricking and sometimes of itching. The disease is very chronic in its nature, beginning by a simple tubercle or by a small cluster. This affection will often spread over the whole of one side of the face, and the loss of tissue which it occasions, and the permanent cicatrix which it leaves behind, give rise to considerable deformity.

Lupus erythematosus is shown by the redness of the skin, occurring in patches of small size, usually on the face, lasting for a time without change, and terminating in a dry and white depressed cicatrix. Associated with this state of the face we not unfrequently meet with similar spots on the fingers, which are frequently mistaken for chillblains. If there exists eruptions in other parts of the body, if there be evidence of the previous existence of eruptions elsewhere, or any of the concomitant signs of syphilis, the experienced physician may easily decide the question.

TREATMENT.

The diet should consist of two-

thirds animal food, indeed animal food should be taken at each meal, with the addition of good ale or porter at both dinner and supper. There is great advantage where children are affected, in mingling a few grains of phosphate of lime with their diet. The medicines especially applicable to all scrofu'ous affections are cod liver oil, iodine, and iron, but these should only be administered by a specialist.

SYPHILIS.

The diseases of the skin arising from the poison are the syphilitic eruptions, which may be considered as the manifestation of an effort on the part of nature to excrete or expel the poison of the blood through the skin; under these circumstances, before entering upon their description, it may be important to glance at the phenoma of the syphilitic poison.

Syphilis is a blood disease originating in a special poison or virus, engendered by intercourse and communicated by contact or contagion. It is a well-known law of animal poisons that, being once introduced into the blood, they excite in that

fluid an action which has for its object the production of a similar poison, and this process goes on until the blood becomes saturated or overcharged with a morbid principle. As soon as this latter condition occurs, an inflammatory action is set up which results in the ejection or elimination of the poison.

This inflammatory movement or syphilistic fever, is therefore a sign of the accumulation of the poison within the blood to such a degree as to disturb the healthy functions of the body, and is attended with symptoms which indicate derangement of the nervous vascular and digestive system, and especially those surfaces of the body through which it

is possible for elimination to occur. This disease is usually contracted, as I said before, by intercourse, but this is not the way by which it may be propagated: it may be communicated by vaccination, by nurses to their nurslings, and some authors think by kissing, but I am rather skeptical about this. For convenience sake Syphilis may be divided into three classes.

1. Primary.
2. Secondary.
3. Tertiary.

There is also the stage of incubation, which is present from the time the disease is contracted, and lasts until the appearance of the first visible manifestation, namely, chancre,

develops, which of course is the beginning of the primary stage. This period varies from two to five weeks, during the continuance of which time, the SYPHILITIC VIRUS is absorbed there is not the slightest symptom or visible lesion that can be recognized as pertaining to the disease about to be developed.

If the poison comes in contact with an abrasion or broken skin, this latter heals just the same as it would have done had there been no inoculation. Primary Syphilis commonly shows itself as an ulcer, but secondary syphilis is a fever in which the whole constitution takes part, and tertiary syphilis is reduced to a local character by the absence of constitutional symptoms.

Within a week or ten days after the appearance of the ulcer, or chancre, we not uncommonly find other symptoms arising, which are highly characteristic of the disease ; these are indurated tumefactions of some of the lymphatic glands. As a rule, several glands may be involved, but the tumors generally appear in the groin. They commence from the size of a small nut to that of a pigeon's egg, frequently becoming inflamed and suppurating.

In addition, certain ganglia at the back of the neck become affected, though they rarely attain the size of the bubos in the groin. The whole of the blood is charged with a poisonous principle, as expressed by

Wilson, and all the organs and structures supplied with that blood suffer to a greater or less extent.

The BRAIN evinces its suffering by mental dejection, the NERVES by a general feeling of prostration and debility. Everything is *couleur de plomb* around the patient, he is unable to pursue his avocation with comfort, and if they require the exercise of his mind, scarcely at all. He is oppressed with a sense of impending evil. Besides the lassitude and languor and weariness which evince the poisoned condition of the nerves, there is often neuralgia to an intense degree, sometimes affecting the head or face, sometimes the joints, when it goes by the name of

Rheumatism. The Neuralgia presents the peculiarity of being nocturnal, that is, of being most severe during the night, and often, but not always, entirely absent by day. The pulse is quickened, the tongue is coated, white, broad, and indented by the teeth. The fauces are more or less congested, the tonsils and soft palate being frequently swollen, their irritation of the larynx producing a mucus cough, and often nausea. The bowels are sometimes constipated, and sometimes relaxed; the urine sometimes clear, and at other times loaded with salts. The conjunctiva is injected and muddy, and the whole skin remarkable for its *yellowish and dirty appearance*, looking

as if saturated with IMPURE and discolored humors. Sometimes it is dry, at others, suffused with a greasy secretion, and at night poures out an abundant and *fetid perspiration*. Such are the general symptoms of the syphilitic fever, but they may not all be present, and those which exist may be complicated by local congestions of the mucus membrane.

The pathology of syphilitic fever are mental and nervous depression and prostration, congested fauces with sore throat, congested and discolored skin, the congestion being partial or general, and assuming the form of an eruption, and added to these, neuralgic and rheumatic pains.

The difference of character per-

ceptible between syphilitic fever and that produced from the poison of measles, scarletina, and small pox, probably originates in conditions extraneous to the animal body, one reaches the blood as an element foreign to its nature, and as soon as it has accumulated to the saturating point, a violent effort is made for its expulsion ; the SYPHILITIC POISON, on the other hand, originates in the human body—it is probably little more than a modification of the natural secretions—it is consequently less irritant in its nature, and it tends to assimilate with the blood and with the tissues rather than to excite an action which shall result in its removal, hence the fever arising from

the poison of measles, scarletina, and small pox, are more violent, more regular, and more transient than the syphilitic fever, or in other words, they are acute while in *syphilis* they are *chronic*.

The poison of syphilis having once entered the system, the blood and tissues appear to become accustomed to its presence. It remains latent for years, or for life, and gives notice of its existence from time to time by a variety of symptoms; nay, more, it is transferable to offspring, not merely to one, but possibly to a series of generations.

Roseola, or the rose rash, is one of the simplest of the forms of con-

STITUTIONAL SYPHILIS, and presents the common characters of blossoming fever, usually of a mild kind, but sometimes severe. It is the form in which the general effort for the elimination of the poison is manifested, is indicative of a certain power on the part of the accumulated poison, and is the common precursor of the other forms of eruption.

The period at which it makes its appearance is between six and nine weeks after the development of the primary disease. Like measles, which it closely resembles, it begins with general febrile symptoms, prostration of strength, and congestion of the mucus membranes of the fauces, then follows the blossoming

forth, which is spread more or less extensively over the surface of the body, being most perceptible on those parts which are covered by the clothes, especially the abdomen.

The efflorescence remains apparent for a variable period, a few days or as many weeks. It is brightest in the evening and under the influence of excitement, and is attended on its decline with exfoliation of the skin. It leaves behind it a fawn-colored, or brownish, stain, and a dry and sordid state of the cuticle. Occasionally the roseolous congestion is defined in its boundary, again the blotches may be irregular in figure, and of variable dimensions, but, whatever the variety of form,

which are mere differences in degree of congestion, the same morbid action exerting itself with greater or less force, they are only varieties of roseola, while roseola is only a variety or stage of the other forms of syphilitic eruptions.

SYPHILITIC PARALYSIS may exist with or without structural change. As the pains of neuralgia, loss of power in a limb may be produced by the presence of specific syphilitic gummata within the sheaths of the nerve trunks, by which the nerve current may be much lessened or completely interrupted. This form may be materially benefited, and often entirely removed, by full doses of Iodide of Potass, with or without

cod liver oil, as may be indicated by other symptoms, and followed by the judicious use of iron, phosphorus and strychnine. Syphilis has a strong partiality for producing limited motor paralysis. When these conditions are produced, electric treatment, combined with the internal remedies just mentioned, will be found useful.

There is another primary form, or rather not quite primary, of ulcer, termed PHAGEDENIC, OR MALIGNANT CHANCER. It is a corroding ulcer without granulations, and distinguished by its circumference, being of a livid or red color. This sore is very destructive, spreading like wild-fire.

The ulcerations are large and un-

healthy looking, their edges are angry and excavated, and the skin around red and indurated. Sometimes their surface is dry, sometimes it pours forth an acrid discharge, and sometimes they are filled with a transparent jelly-like substance. These large ulcers are most frequently met with on the face, but they are also seen occasionally on other parts of the body. In several cases we found large phagedænic sores on the legs and near the ankles, which were of considerable magnitude and highly dangerous.

Now the inside of MOUTH, THROAT, and NOSE become affected, the uvula and tonsils become very painful, *hot, inflamed, and ulcerated* pustules

appear in the roof of the mouth, which degenerate into round malignant ulcers, which rot the bone as far as the nostrils.

The affection of the throat is a whit , slimy-looking ulceration, and there is a most *offensive discharge*, with a FETID BREATH, the soft palate being not unfrequently completely removed, or hanging in detached portions ; in fact, the upper and back parts of the throat present one vast ulcerated cavity, covered with adhesive matter, and not only does the voice become hoarse, thick, and low, but swallowing the softest food is difficult and painful.

The lining membrane of the nose is also affected; the bones and cartil-

ages likewise. An incrustation forms on the surface. When this is removed, a quantity of bloody mucus matter is seen on the part exposed. As this horrid disease progresses, it usually leaves the face a loathsome disfigurement, the cavity of the nostrils is exposed from the throat, the natural appearance of the countenance is destroyed, and a disgusting ulceration alone marks the place where the nasal organ once existed.

WARTS AND VEGETATIONS,

due to the exuberant growth of the papillæ of the mucus membrane and skin, are another form which syphilis is apt to present in situations, frequently or permanently moistened with secretions, such as the inner surface of the labia pudendi, the whole extent of the uvula, the perinæum, the circumference of the anus, and, in men, the fossa gorowæ, glandis, the anus.

TERTIARY SYMPTOMS.

As Tertiary Syphilis becomes settled in the skin, it is remarkable how exactly it acquires the resemblance and assumes the characters of Lupus, until at last it becomes difficult, and sometimes impossible, to distinguish between them, and a kind of lupus is generated, which is recognized as being the result of the syphilitic poison in its tertiary state. I observed this particularly in my visit to the Lepra Hospital in Honolulu, in the Sandwich Islands, in 1870.

In Lupiform Syphilis there may exist one or several tubercles grouped together: the affected skin is thickened, hard, of a purplish red hue,

and upon one or more of the tubercles a thin black crust is formed. If the crust be removed, a deep, excavated pit, filled with unhealthy pus, and discharging sanious fluid, is beneath. The ulcerative action is slow and gradual, lasting for months without change. At other times the ulcerative action is rapid: several of the pits communicate, and a large unhealthy ulcer is formed, which destroys the part upon which it is situated, and is followed, on getting well, by indelible cicatrix, with puckering and contraction of the surrounding skin. When the ulcer is situated on the nose, a portion of that organ is destroyed, and much DEFORMITY results, and equal mis-

chief, although unaccompanied by the like deformity, may occur upon any part of the body.

When a cluster of tubercles are assembled together, forming a patch of diseased and disorganized skin, and the surface is perforated by several deep ulcerated pits, the affection resembles Lupus still more closely:

IMPORTANT GENERAL REMARKS.

The fever of syphilis comes upon the patient unexpectedly during the period of second incubation and precedes the outbreak of the first eruption with a *true chancre*. Sometimes the BUBO SUPPURATES, and the formation may be attended by a rise of

temperature, but this would not be syphilitic fever.

Neither are the conditions of tertiary syphilis with the bone and visceral lesions in brain syphilis, which causes a rise in temperature. This also is not syphilitic fever.

THE TRUE SYPHILITIC FEVER comes on within two months after infection, sometimes much longer, but in average cases during the early part of the second month after the appearance of the chancre. It is accompanied with syphilitic pains in the muscles and joints, and resembles an attack of inflammatory rheumatism. It is attended by headache and great prostration, and assumes a type of typhoid fever. Where the

fever runs high and the eruption is coming out, it is often taken for measles, or even small-pox. I HAVE OFTEN SEEN SYPHILITIC FEVER PRODUCE JAUNDICE.

Syphilitic fever usually disappears soon after the general eruption comes out. This terrible disease is to be found *everywhere*, in all RANKS OF LIFE. It infects the INFANT before its BIRTH, and TOTTERING OLD AGE is not exempt from it. The origin of entrance of the poison into the blood may not be discovered, but *no amount of respectability can be a guarantee that any one may not have encountered the various forms of approach which this insidious monster is capable of assuming.*

FUNCTIONAL IMPOTENCE.

Syphilis may cause functional impotence not due to any physical lesion of the genital glands. In the tertiary stage these glands may appear their normal size, but feeling a little flabby as if less full of blood than usual. When this occurs, the patient may lose all sexual desire and absolutely all power of erection. This condition is certainly due to some impression upon the NERVOUS SYSTEM. WITH PROPER TREATMENT the POWERS can be RESTORED AND THE ORGANS REGAIN THEIR FIRMNESS.

The affection is not due, as has been claimed, to the use of iodides, or to any wasting influence their prolonged use exercises upon gland-

ular structure, for patients have this form of impotence who have never taken such remedies.

THE SYPHILISTIC COUNTENANCE.

Certain physical traits, marked more or less strongly in different cases, are commonly enough encountered. They constitute what Dr. Hutchinson calls the *Syphilitic Countenance*, and are striking enough to attract attention and to put an OBSERVANT PHYSICIAN upon the track of syphilis in many cases before he *has asked the patient a single question*, or made any diagnosis. Therefore it is evident that all the eruptions due to syphilis must be possessed of VERY MARKED CHARACTERS AND VERY EASY OF DETECTION.

TREATMENT.

In the treatment of Syphilis there is no subject in the entire range of medical science that demands a greater amount of practical knowledge and skill. The natural delicacy of patients who have unfortunately contracted this disease, makes them fly to all the empirical remedies advertised for its cure; the consequence is the *patient's future happiness is often destroyed*. There are so many phases in different individuals, that it is impossible to lay down any fixed rule of treatment that may be relied on; indeed, all the remedies that are found useful are of so DANGEROUS a character in *unskillful hands*, that, if taken with-

out the supervision of a *competent physician*, would lead to terrible results. During my extensive practice I have seen more patients suffering from bad treatment than I can well count. The cure of this disease is therefore much more easily effected before any complication arises from such causes.

NERVOUS AFFECTIONS OF THE SKIN.

These affections are distinguished by alterations of its natural sensibility, such alteration having its seat in the nervous system, and especially in that portion of the nervous system which composes the skin nerves. There may be an augmentation or increase of sensibility, or diminution or decrease of sensibility, or it may be one of perversion of sensibility.

Augmentary sensibility of skin is frequently associated with a tendency to Neuralgia or Hysteria. Its symptoms are a state of sensitiveness raised to so high a pitch that

the slightest pressure on the skin is painful. The patient is unable to bear his clothes, the vibrations of the house, even sounds produce a painful sensation, and he is prevented from lying in a natural posture from intolerance of the pressure occasioned by the weight of his own body. I have often been consulted in cases like this, and have been able to trace their source, and consequently the treatment has proved efficacious.

Diminution of sensibility is a loss of sensation of the skin more or less complete. One form of it is found in the Lepra. One of the first signs of this disorder that is noticed by the patient is often a loss of sensa-

tion of the skin. A gentleman who consulted me for this disease, told me that his attention was drawn to it first by accidentally touching a hot vessel with his arm, and finding it produced no sensation.

Perversion of sensibility is a state of itching of the skin without any cause being apparent. There is no redness, no alteration of surface, nothing in fact that the eye could detect as a disease. It is sometimes sympathetic, or some distant source of irritation, such as intestinal worms or hæmorrhoids. When it is local, the parts of the body in which the itching is most troublesome are its apertures, those in which the skin is continuous with the mucus mem-

brane. For example, the eyelids, the ncras, and especially the anus, the pudendum, and prepuce, but it also attacks other regions, such as the scalp and scrotum. The affection of the anus is often intensely severe and troublesome,—indeed, is sometimes almost unbearable,—and creates a state of excitement of the whole nerves system. Children suffering with worms are often tormented with this itching. When it affects the scrotum, it is especially eczematous, particularly when the skin is much scratched and torn by the nails. I have a case under my treatment which was most obstinate, but is now progressing favorably.

FOODS AND DRUGS.

Certain foods and drugs have a tendency to produce changes or eruptions in the skin. Amongst the former should be noticed alcohol as generating a severe kind of redness of the skin, and shell-fish and fruit are common causes of nettlerash. We frequently see eruptions produced by arsenic, mercury, belladonna, copaiba, and some other drugs, but their effect in this way is very uncertain and fugitive, and appears to depend much on the peculiarity of the individual. Much more potent, says Hebra, in the generation of the diseases of the skin, than the internal causes, which have their

seat in the organism itself, are those agencies which are external to the body. Of the latter, I may call attention to the following as being the most active: want of cleanliness and general neglect of the skin. We meet with examples every day of eczema, and other eruptions of the scalp, mainly produced by neglect and accumulated dirt, and pent-up secretions.

Irritating applications to the skin, whether in the form of drugs or the friction of flannel underclothing, or local irritants met with in particular trades and occupations, all have a marked effect in exciting various forms of eczema. Some individuals are so sensitive to local irritation

that even a simple plaster will produce a copious eruption. Climate, and sudden changes of temperature, may be included amongst the less important exciting causes of cutaneous affections.

COMEDONES, from *comedo*, to eat up, to devour like grubs, a term applied to the so-called grubs of the skin. The simplest form of this disease is that which is popularly known under the name of WORMS, or GRUBS. In this affection the sebaceous secretion is inspissated, and produces complete distension of the related hair follicle. Reaching the mouth of the latter, the secretion hardens and becomes deeper in color, and at the same time, from exposure

to the dust and dirt of the atmosphere, the extremity is rendered dingy and dark colored.

This DISCOLORATION of the sebaceous substance at its extremity, gives rise to the appearance of a round black spot with which in some persons the skin of the face, particularly of the nose, is more or less thickly studded. If a fold of skin including one of these spots be pressed between the fingers, the concreted secretion is squeezed out under the form of a little white cylinder, about a line in length and blackened at its extremity. It is the lengthened figure of this little cylinder with its dark extremity that has gained for it its popular designation. Instead of be-

ing soft and easily pressed out from the hair fol'icle, it sometimes happens, where the secretion has remained undisturbed for some time, that the little cylinder has become desiccated, and resembles horn both in appearance and density, in which case the secretion requires to be dislodged by a pointed instrument or withdrawn by means of a pair of ciliary forceps. In a case of the kind now before us—a young lady, aged 20—there are several patches of the skin, each about the size of a crown piece, on different parts of the body, closely studded with these horny worms or grabs, every hair follicle in the affected area being occupied by its little head slightly

projecting beyond the plane of the surrounding skin. Many of the means used by young people to get rid of these unsightly black specs are highly dangerous ; their extermination can only be effected by a proper course of treatment.

AFFECTIONS OF THE HAIR SYSTEM

The disorders of the hair having reference to quantity and color, are hairiness or excess of hair, or deficiency of hair, or discoloration of hair. There can be no doubt that, in some persons, the growth of hair is more active than in others but to what extent this difference may be carried on is unknown.

Judging from female hair, which is permitted to grow to its full length, we may rightly infer that hair left to itself grows to a certain length and then falls off to be replaced by a fresh growth. We know the beard grows about six inches and a half

yearly. Hair is sometimes developed to considerable length on the upper lip and chin of women at different periods of age. It, however, occurs most frequently in those possessed of a naturally strong growth of hair. In young women it is often associated with disturbed *menstrual* functions ; on the other hand, we have seen several instances in which no such disturbance existed, where the vital functions were well performed, and where the subjects were remarkable for robust health.

The development of hair upon the upper lip and upon the chin is more common in unmarried females *of a certain age*, in whom from inaction the ovaries have become atrophied.

It is also observed in sterile married women. A similar condition is remarked in women who have ceased to menstruate either from natural or pathological causes.

I am often appealed to for the relief of this excess of hairiness in women. The age of the patients vary considerably, and the causes which will be found most common in the production of this state, are NERVOUS and NUTRITIVE debility. (Out of many cases I find NERVOUS DEBILITY, ANXIETY, and AFFLICTION to be the remotest predisposing cause; also, deferred and arrested menstruation, and DEFECTIVE NUTRITION of the SKIN. THE TREATMENT must be directed to the removal of the remote predisposing

cause, and of the debility engendered by that cause. After the general functions of the body have been regulated, we have derived advantage from small doses of Fowler's Solution, the local use of the Juniper Tar Soap, and active ablutions with cold water. DEPILATORIES should be discountenanced as much as possible, and especially *plucking out exuberant hair with tweezers*, as remedies calculated to injure the skin, to increase the evil, and frequently to add to the existing deformity, a popular eruption induced by irritation of the hair follicles. We have occasion to note a variety of irrational attempts to remove the growing hair, such as the use of

NITRATE OF SILVER, CAUSTIC POTASH, NITRIC and MURIATIC ACIDS, etc., but the most remarkable that came under my notice was singing the chin, and that failing, piercing the follicle with a red-hot needle. The needle, having been heated in the candle and coated with carbon, left a permanent black spot at the seat of the puncture, like that produced by tattooing, and the hair continued to grow.

ALAPECIA, derived from the Greek word, a *fox*, because foxes are often seen to be more or less divested of hair when suffering under the mange, is used at present as the generic designation for thinning of the hair and baldness, and offers three varieties :

1. SIMPLE THINNING OF THE HAIR.
2. TOTAL LOSS OF THE HAIR OF LIMITED EXTENT.
3. TOTAL LOSS OF THE HAIR OF THE SCALP.

The change of the latter is often rapid; in the course of a few weeks an abundant head of hair may be transformed into a thin and scanty thatch, barely sufficient to hide the white skin from which it grows. If the scalp be carefully examined in these cases, it will be found to present various *morbid* characters. Sometimes the skin is dry, scurfy, and hot, and exhales an unpleasant odor. Sometimes it is polished, and has the aspect of being relaxed, the pores being large and dilated, and

at other times there may be extensive concretions of desiccated sebaceous substances. The hair also exhibits a variety of appearances, of which the chief is a dry and parched look, and a degree of roughness resulting from the admixture of hair of every length.

This roughness and unevenness being partly the result of the broken state of the hair and partly of irregular reproduction, some of the young hairs being moderately thick, but the greater part fine and silky, but with very little hold on the skin. The hair is sometimes combed out in prodigious quantities, and, if the roots be examined, they will be found thinner than the shaft, showing the effects of exhausted nutrition, and

not unfrequently the root is embraced by a small mass of hardened substance.

The exhaustion of the follicle for a long time after the fall of the hair, making no effort to reproduce it, and at last the effort is made, the resulting hair is either too thin to maintain its position, or is twisted and crinkled, giving rise to the expression *withered* hair. FEMALES are more liable to this affection than MALES, their susceptibilities are greater, and they are more open to the influence of disturbing causes. The age at which this affliction is most frequent is between twenty and thirty. At all events, out of the last hundred applications for treatment I have had,

eighty-seven were between those ages. The remote predisposing causes in these cases, arranged in the order of frequency, are as follows: SCARLET FEVER, RUBEOLA, WHOOPING COUGH, organic disease, anxiety, fatigue, affliction, pregnancy, and parturition, rapid growth, neuralgia, and nervous shock.

CLIMATE and SEASON, CONGENITAL WEAKNESS, DERANGED MENSTRUATION, FEVER, and certain kinds of *eruptions*. The local injuries that had resulted in this affection were accidental injury to the hair, stinging by bees, and a bruised wound. Upon proper treatment the return of hair upon the bald patches is always slow, but sometimes more rapid than could

be supposed, from a view of the nature of the disease.

Nevertheless, the restoration of the hair is greatly influenced by the predisposing cause. For instance, after pregnancy the hair has reappeared in from one to three months. This may be regarded as a case of accidental lowered vitality, but when the constitutional powers of the patient are exhausted a longer time will be required. It is also worthy of remark that, on its reproduction, the hair is usually white, or fair like that of an infant, but as it obtains increased power of growth, the natural tint of the adult is gradually restored.

MERCURY, when taken for a length of time, seriously affects the secre-

ting organs of the body, and among these the secreting apparatus of the skin. Baldness is modified by sex ; in the male it is common, but in the female comparatively rare. We are disposed to believe that the difference between the sexes in this respect lies in the greater proportion of subcutaneous fat existing in the female.

The scalp of bald persons is usually thin, and eunuchs, who are generally fat, are remarkable for the length and permanency of their hair. Some authors ascribe the destruction of the hair to a vegetable fungus, but this is doubtful.

TREATMENT.

The principal indication to be fulfilled in the treatment of baldness is to stimulate the capillary circulation of the scalp, which is evidently below the natural standard. With this view we are in the habit of recommending the washing of the head every morning with cold water, drying it by friction with a rough towel, brushing it with a hard brush until redness is produced, and then applying under proper advice some stimulating application. In women whose long hair contra indicates the use of the cold bath, proper applications with plentiful brushing must be relied upon.

MILIARIA.

The name Miliaria (Miliun a milletseed) designates an eruption of transparent vesicles induced by excessive sweating. These minute vesicles resemble drops of water, and contain when not inflamed only a little sweat which cannot escape through the cutermost horny layer of the cuticle, which is raised in consequence in the form of a small perfectly clear thin walled vesicle. The vesicles resemble small drops of dew, and contain a fluid which never become yellow and puriform, their base is never reddened, and they are never surrounded by a red areola. The parts affected by the eruption are not

liable to be again attacked by it, and there are no subjective sensations attending its presence. It is observed that shiverings are frequent precursors of this cutaneous affection, and that in many cases, as per example in puerpeal fever, it is connected with purulent infection.

Indeed, deposits of pus are sometimes actually present when the miliaria first makes its appearance, and when they are formed afterwards the morbid condition which causes them always existed before the rash was developed.

PIGMENTARY DISEASES (FRECKLES).

The agency of light and heat in the development of pigment in plants and animals is familiar to every one, on the other hand little or no color is developed in plants grown in the dark. Frequent exposure to a bright sun has a marked effect in producing an increase in not only the coloring matter of the skin, but also that of the hair.

In young people with light or red hair there exists an especial tendency to the formation of little yellowish spots of pigment on the face, neck and arms, commonly known as frec-

kles. This tendency diminishes with advancing age. During the performance of certain natural functions, such as menstruation, and more especially in pregnancy, there is an extra deposit of pigment in certain parts of the skin, for example on the nipple of the breast.

The changes in the color of the skin may be considered physiological rather than pathological, but cases are met with where the spots are congenital, or the result of disease of the skin. The affections which always leaves deposits are Syphilitic eruptions and Eczema. In India, a very severe form of this disease is common, and known as White Leprosy, but this must not be con-

founded with true Leprosy. The general achroma of the skin is best illustrated in the Albino, in whom there is a total absence of pigment, not only in the skin but also in the hair and in the choroid coat of the eyeballs. The absence of color is in this case physiological, and often hereditary, but as far as the individual is concerned, it is a state of disease, as it interferes with his comfort in a very serious degree : he is almost blind by day, and only sees as well as other people see in the gloom of evening and at night.

Lucosma usually attacks the hairy part of the body, the hair in such cases becoming perfectly white, but it makes its first appearance fre-

quently on the extremities of the body, the fingers and the toes, after which it generally appears on the face, neck and lips, in the neighborhood of the groin and on the abdomen, on the scrotum and penis. On the scrotum it usually assumes the form of longitudinal streaks. In India, the disease is more commonly found on the seacoast than elsewhere. There is no symmetry of arrangement of the blotches ; they are defined by a sharp edge, and the surrounding skin becomes black.

Hereditary and acquired nervous conditions and diseases, depending on transmission from a parent stock, frequently passes over individual members of a family, but when it

does appear it often shows itself very differently from that which declared itself in the original. Thus out of a number of descendants of an intemperate or debauched ancestor, one may be affected by a partial prostration of physical power, and another may develop the poisons of syphilis, mercury, &c, besides other diseases unnecessary to particularize.

Therefore, how important is it that those about contemplating MARRIAGE should make CERTAIN THAT NO DEBILITY EXISTS; that no DISEASE that may have appeared simple, and easily cured, lurks in the system. Dr. Burns, Professor of Midwifery in the University of Glasgow, in his work on diseases of women and children,

says : I do not pretend to explain the theory of syphilis, but content myself with relating well-established facts. *Premature labor is not unfrequently the indication of this, the offspring presenting a puny, feeble, emaciated and wrinkled form, the eyes are red and inflamed, mattery discharges are emitted from the eyelids, copper-colored blotches disfigure the shrivelled skin of the genitals and lips, the nostrils are clogged with an offensive discharge, the nails come off, and indeed many children are brought into the world in a state of absolute rottenness.*

After the age of infancy congenital syphilis gradually merges into what may be termed *hereditary syphilis* ;

the infantile syphilis apparently gets well, but several months or years afterwards it may break out again. Sometimes, however, the patient has been free from any indications in his infantile age, the first manifestations of its presence in the system, being delayed till the period of advanced childhood, puberty, or even adult life. This more properly constitutes *hereditary syphilis*.

Some of the forms, however, are remarkable for extreme obstinacy, refusing the slightest obedience to medical agents, and maintaining their course unimpeded. These cases are only to be managed by opposing OBSTINACY to OBSTINACY, by following them up with appropriate remedies,

that is with remedies directed upon a proper principle when even the most enduring will be found to yield at last.

In pursuing this course it is evident that we must seek to obtain a gentle and continuous influence over the system, such as that by which nature conducts her operations. We give expression to our meaning by the term *ALTERATIVE* : our process should be essentially *ALTERATIVE*, large doses of medicine and heroic action are only calculated to exhaust the powers and do mischief.

In making these observations we have now in our memory several persevering “incurables” who, by a steady continuance of remedies,

are fast approaching cure. In these very obstinate cases it is important to remember that, when the remedies disagree with the patient or seem to cease to exert a beneficial action, they should be *immediately suspended*, and resumed after such an interval of time as may seem good in the judgment of the doctor. Like food and hygienic conditions, medicines, which are very beneficial at one moment, lose their power after a time, and then require to be changed or modified, either in form or quantity, until the appetite for them returns. This is a very necessary rule to be borne in mind in the management of so obstinate a class of diseases as those of the skin.

Well directed exercise favors the preservation of a healthy skin. Exercise calls into direct action the majority of the organs of the body, and thus acts powerfully on the skin, by stimulating its functions, increasing its temperature, awakening its tone, and subjecting it to a current of atmosphere favorable for its respiratory offices. The conditions subservient to health, namely food and raiment, are in one respect different in their nature from those which are to follow, exercise and ablution. Exercise, in so far as practicable, should be regular, a daily purpose is to be answered by its use, and therefore it is unreasonable to expect that benefit should arise when it is neg-

lected for days consecutively, and made to be secondary to occupations and pursuits of a trivial nature. To those who know themselves, who have a proper acquaintance with the animal organization, there are sensations which indicate the want of exercise: they have the power of supplying that want or of rejecting its calls, but nature in the end must triumph, punishment will assuredly follow the breach of her appointed laws.

Exercise promotes the removal of the impurities of the system. Suppose them to remain, the human frame immediately becomes a source of destruction to itself. Matters which should be cast off as useless and noxious are mingled with the blood,

and fermented by its heat are developed on the skin in the form of flushes and eruptions, or they are exhaled as fetid emanations from the lungs, or disposed of in some other disagreeable way. The brain also suffers in its turn, the mental faculties are disturbed, the intellectual enfeebled, and the sentiments lowered.

The injurious effects of neglected exercise cannot be better illustrated than in the medical history of those who are compelled to lead a sedentary life. In such persons we find a *pallid and discolored skin, depressed spirits, incapacity for exertion, headache, frequent palpitation of the heart, fullness of the head, dyspepsia, tenden-*

cy to *biliousness*, and general imperfection and irregularity of the elementary functions. BENEFICIAL EXERCISE should be taken in moderation, a short walk in agreeable society is infinitely preferable to one of greater distance, and taken as a task. I mention this because there is a feeling too prevalent among the unthinking, that if a little be good, a great deal must necessarily be better.

BATHING ON THE HEALTH OF THE SKIN.

WATER is the most grateful, the most necessary, and the most universal of the gifts of a WISE CREATOR, and in an age when man drew his luxuries more from nature and less from works of his own production, when water was his friend more than his servant, water was regarded as a representative of the DEITY, and was raised to the dignity of a mythological god. From the first hour of existence to his latest breath, in health and in sickness, on the throne and in the most humble dwelling, water is an universal good. Baths were dedi-

cated by the ancients to the divinities of medicine, strength and wisdom, namely Æsculapius, Hercules, Minerva, and I may also add the goddess of health, Hygeia.

The use of water has been enforced as a religious observance and has been adopted as one of the symbols of Christianity.

WATER IN ITS RELATIONS TO CLEANLI-
NESS, HEALTH, AND RELIEF
OF DISEASE.

It enables us to remove IMPURITIES from our bodies, from the *clothes* we wear nearest our skin, and it effects this purpose by its quality of dissolving saline matters, and holding in temporary suspension those which are insoluable.

There are, however, certain substances for which water has no influence, unless assisted by chemical power. These substances are oily matters of all kinds, and the skin is abundantly provided with an unctuous secretion. The chemical power which is called into use for the subjection of the oil is SOAP.

SOAP renders the unctuous product of the skin freely miscible with water, and hence is an invaluable agent (when good) for purifying the skin. Bathing and exercise are very closely allied to each other; they both stimulate the actions of the skin, and both if carried too far are productive of fatigue. Bathing, again, is indebted to exercise for some of its useful pro-

perties. In like manner the rules of bathing and those of exercise are very similar. Bathing, to be efficient in preserving health, should be regular, should be commenced by degrees, and increased by a process of training, and should not be permitted to intrude upon hours devoted to some important function, such as digestion ; it must not approach too near a meal, that is to say, if it be attended with the least fatigue, nor must it follow a meal too closely. The time occupied in bathing in cold water by invalids, should not exceed a few minutes, but persons in health may carry it to an unlimited extent, provided that they combine with it active exercise.

I come now to the immediate physiological effects of bathing on the system. When the body is moistened with a sponge steeped in cold water, or when effusion by a bath is effected, the skin immediately shrinks, and the whole of its tissues contract. As a result of this contraction, the capacity of the cutaneous system of vessels for blood is diminished, and a portion of the blood circulating through them is suddenly thrown upon the deeper parts, and internal organs. The nervous system, among others, participates in it, and is stimulated, and communicating its impression of stimulus to the whole system, causes a more energetic action of the heart and blood vessels, and a consequent

rush back to the surface. This state is termed reaction, the first object and purpose of every form of bathing, the test of its utility and security.

Reaction is known by the redness of surface, the glow, the thrill of comfort and warmth which follow the bath. Therefore I need not say the bather should direct all his care to ensure this effect. By it the internal organs are relieved, respiration is lightened, the heart is made to beat calm and free, the mind feels clear and strong, the tone of the muscular system is increased, the appetite sharpened, and the whole organism feels invigorated. In order to increase and promote the reaction of the skin, various manipulations

are resorted to, some of them being practised in the bath, others after quitting it. The means I recommend of stimulating the skin after the bath, are the rough towel and flesh brush. The electrical qualities which are spoken of in connection with horse-hair gloves are an innocent fraud on the imagination of the purchaser.

INFLUENCE OF DIET ON THE SKIN.

Food is in a two-fold manner a source of warmth, firstly by supplying the material of nutrition requisite to balance the continual waste taking place in the body, and secondly by conveying into the system those elements which by their chemical combinations elicit heat. To insure these results food must be wholesome and sufficient, well cooked, and must combine all the variety of animal and vegetable which a Divine Providence has bestowed upon man. All nutritive substances may be divided as follows : Aqueous, Saccharine, Olea-

ginous, and Albuminous. The first of these needs no explanation, it is an abundant and necessary constituent of the body, and an universal component of our food. The saccharine class is derived from the vegetable kingdom, the albuminous from the animal, and the oleaginous from both. Man's food to be complete must contain more or less of all these principles, hence milk is a mixture of the four staminal principles I have described, and therefore most nourishing and useful. Due regard must be paid to the goodness of the food selected, but it may be as well to remark that all aliment to be nutritous and beneficial to the system, must be sound and fresh.

Should any decompositions in food arise, combinations of a dangerous kind are generated, which act as poisons on the system. Articles of food most likely to become decomposed, are fish, potted meats, sausages, game, etc. There is nothing more deleterious to the digestion, and consequently the skin, than drinking hot liquids and iced water at the same time. The large consumption of sweetmeats and candies are highly injurious to a healthy skin, and ought therefore to be avoided.

THE END.

DR. JORDAN,

having for many years made

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